PTO/SB/17 (10-08)
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Under the Pa	perwork Reduction Act or	ired to re	respond to a collection of information unless it displays a valid OMB control number						
Effective on 12/08/2004.				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						10/542,200-Conf. #3457			
FEE TRANSMITTAL			Ľ			July 15, 2005			
For FY 2009						Toshihiro ITO			
101112009				Examiner Name J.		J. M. J. Hanra	J. M. J. Hanrahan		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	4152				
TOTAL AMOUNT OF PAYMENT ((\$) 130.00		Attorney Docket No. 14		1422-0683PU	1422-0683PUS1		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		ING FEES	SEAF	RCH FEES	EXAMI	NATION FEES	;		
A !! notion To	Eas (¢)	Small Entity	(¢)	Small Entity	F (¢)	Small Entity	Eass	D-14 (6)	
Application Ty			<u>ee (\$)</u>	Fee (\$)	Fee (\$)		rees	Paid (\$)	
Utility	330		540	270	220	110			
Design	220		100	50	140	70			
Plant	220		330	165	170	85			
Reissue	330		540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES							Fee (\$)	Small Entity Fee (\$)	
Fee Description Feeh plains aver 20 (including Projectors)									
Each claim over 20 (including Reissues)							52 220	26	
Each independent claim over 3 (including Reissues) Multiple dependent claims							220 390	110 195	
			-	D-1-1 (A)		- 14 - I - Damana			
Total Claims Extra Claims Fee (\$)			⊢ee	Paid (\$)	_	/lultiple Depend		.	
8 20 - or HP x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.									
			Fee Paid (\$)						
3 3- or HP = x Fee (\$) =				Faid (#)					
	ber of independent claims i								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(4. OTHER FEE(\$) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00									
SUBMITTED BY									
Signature	1/w 3. /3	#48,501		legistration No. Attorney/Agent)	28,977	Telephone	(703) 20	5-8000	
Name (Print/Type)	Gerald M. Murphy		· · ·			Date	Decembe	r 8, 2008	

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